UNITED STATES SECURITIES AND EXCHANGE COMMIS

Washington, D.C. 20549

TEMPORARY FORM D

NOTICE OF SALE OF SECURIT PURSUANT TO REGULATION D SECTION 4(6) AND/OR UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL

OMB NUMBER: 3235-0076 January 31, 2009

Expires: Estimated average burden hours per response..

• .	imendment and name has changed, and indicate c	hange.)	
Offering of Series A Preferred Stock			
Filing Under (Check box(es) that apply):	□ Rule 504 □ Rule 505 ☒ Rule 506	☐ Section 4(6) ☐ UI	LOE
Type of Filing: 🛮 New Filing 🔲 Ar	mendment		
	A. BASIC IDENTIFICATION DAT	ΓA	
1. Enter the information requested about the	issuer		
Name of Issuer (Check if this is an ame Awareness, Inc.	indment and name has changed, and indicate chan	nge.)	
Address of Executive Offices 880 Winter Street, Suite 300, Waltham, Mas	(Number and Street, City, State, Zip Co sachusetts 02451	ode) Telephone Number (866) 487-5623	r (Including Area Code)
Address of Principal Business Operations (if different from Executive Offices)	(Number and Street, City, State, Zip C	Telephone Number	r (Including Area Code)
Brief Description of Business	JAN 1 3 20	09 E	
Software and web support services	THORPCONDE	IPP De	
Type of Business Organization	THOMAS AND THE	UIEKO	(1000) ATALO DE ATALO DE LA CONTRACTOR DE CO
	☐ limited partnership, already formed	other (please specify	09000715
□ business trust	☐ limited partnership, to be formed	<u></u>	
Actual or Estimated Date of Incorporation of Jurisdiction of Incorporation or Organization	Month 0 2 r Organization: I: (Enter two-letter U.S. Postal Service abbreviati CN for Canada; FN for other foreign jurisdicti		□ Estimated

GENERAL INSTRUCTIONS

Note: This is a special Temporary Form D (17 CFR 239.500T) that is available to be filed instead of Form D (17 CFR 239.500) only to issuers that file with the Commission a notice on Temporary Form D (17 CFR 239.500T) or an amendment to such a notice in paper format on or after September 15, 2008 but before March 16, 2009. During that period, an issuer also may file in paper format an initial notice using Form D (17 CFR 239.500) but, if it does, the issuer must file amendments using Form D (17 CFR 239.500) and otherwise comply with all the requirements of §230.503T. Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 100 F Street, N.E., Washington, D.C. 20549

Copies Required: Two (2) copies of this notice must be filed with the SEC, one of which must be manually signed. The copy not manually signed must be a photocopy of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

A. BASIC IDENTIFICATION DATA

- 2. Enter the information requested for the following:
 - Each promoter of the issuer, if the issuer has been organized within the past five years;
 - Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
 - · Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
 - Each general and managing partner of partnership issuers.

Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	⊠ Executive Officer	Director ■	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Bruce, John					
Business or Residence Address	(Numbe	r and Street, City, State, Z	Lip Code)		
880 Winter Street, Suite 300, Wal	tham, Massachuset	ts 02451			
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				Managing Fartier
Nordin, Ron					
Business or Residence Address	(Numbe	r and Street, City, State, Z	Lip Code)		
33 York Street, Lexington, MA, 0	2420				
Check Box(es) that Apply:	□ Promoter	☐ Beneficial Owner	☐ Executive Officer	☑ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Bogan, Thomas					
Business or Residence Address	(Numbe	r and Street, City, State, Z	Lip Code)		
880 Winter Street, Waltham, Mas	sachusetts 02451				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Beir, Jeffrey					
Business or Residence Address	(Numbe	r and Street, City, State, 2	Lip Code)		
950 Winter Street, Suite 4600, W.	altham, MA 02451				
Check Box(es) that Apply:	☐ Promoter	☐ Beneficial Owner	■ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				
Richards, Stephen					
Business or Residence Address	(Numbe	r and Street, City, State, Z	ip Code)		
880 Winter Street, Suite 300, Wal	tham. Massachuset	ts 02451			
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	☐ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	ividual)				Triangling : artics
NBVM GP, LLC*					
Business or Residence Address	(Numbe	r and Street, City, State, Z	(ip Code)		
950 Winter Street, Suite 4600, Wa	altham, MA 02451				
Check Box(es) that Apply:	☐ Promoter	■ Beneficial Owner	☐ Executive Officer	□ Director	☐ General and/or Managing Partner
Full Name (Last name first, if ind	iviđual)				Mining ing 1 maner
Greylock XII GP LLC**					
Business or Residence Address	(Numbe	r and Street, City, State, Z	Lip Code)		
880 Winter Street, Waltham, MA	02451				

^{*}NBVM GP, LLC is the beneficial owner of shares held of record by North Bridge Venture Partners V-A, L.P., North Bridge Venture Partners V-B, L.P. and North Bridge Venture Partners VI, L.P.

^{**}Greylock XII GP LLC is the beneficial owner of shares held of record by Greylock XII Limited Partnership and Greylock XII-A Limited Partnership.

		_		B. INF	ORMATIC	ON ABOU	r offeri	NG				
1. Has the is	suer sold o	r does the is	suer intend	l to sell to:	non accredit	ted investor	rs in this of	fering?			Yes	No ⊠
1, 1145 the 15	suci solu, o	r does are is										_
					Appendix,		_					
2. What is th				e accepted	from any in	dividual?	***************************************				\$_*	
*Subject to 1	he discretio	n of the iss	uer.								V	No
3. Does the	offering per	mit joint ov	vnership of	a single un	it?						Yes ⊠	
4. Enter the	information	requested 1	for each per	rson who h	as been or w	vill be paid	or given, di	rectly or in	directly, an	y commiss	ion or sir	milar
remuneration	for solicita	tion of pure	chasers in c	onnection v	vith sales of	securities:	in the offer	ing. If a per	rson to be l	sted is an :	associate	d person or
agent of a bro persons to be	listed are a	er registere ssociated p	a with he s ersons of si	seC and/or ich a broke	with a state r or dealer.	or states, 1 vou may se	ist the name it forth he i	e or the broi	for that bro	r, 11 more ker or dea	than live ler only.	: (3)
Full Name (L						,					·	
Business or I	Residence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)			•			
				-	_							
Name of Ass	ociated Bro	ker or Deal	ler			· · · · · · · · · · · · · · · · · · ·						
States in Wh	ch Person I	isted Has	Solicited or	Intends to	Solicit Purc	hasers						
											All Stat	
[AL]	[AK]	[AZ]	[AR]	[CA]	(CO)	[CT]	(DE)	[DC]	(FL)	[GA]	[HI]	[ID]
(IL)	(IN)	[14]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]
[MT]	[NE]	[NV]	[NH]	[M]	[NM]	[NY]	[NC]	[ND] [WA]	(OHJ [WV]	(OK) (WI)	[OR] [WY]	[PA] [PR]
[RI]	[SC]	[SD]	[TN]	[TX]	(UT)	[VT]	[VA]	[WM]	[""]	[771]	[44.1]	[113]
Full Name (I.	ast name ri	rst, it indivi	iouai)									
Business or F	tesidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Ass	ociated Bro	ker or Deal	ler									
States in Whi	ich Person I	Listed Has S	Solicited or	Intends to	Solicit Purc	hasers						
•				,							All Stat	
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
[IL]	[IN]	[IA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO] [PA]
[MT] [RI]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[MM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	(OH) [WV]	[OK] [WI]	[WY]	[PR]
Full Name (L				[TA]	[01]	[+1]	[11]	[471]	[,,,,]		[** 1]	[7 18]
run Maine (i.	asi nanc n	ist, ii iiidivi	iuuai j									
Business or F	tesidence A	ddress (Nu	mber and S	treet, City,	State, Zip C	Code)						
Name of Ass	ociated Bro	ker or Deal	er									
States in Whi												
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[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	[FL]	[GA]	[HI]	[ID]
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[RI]	[SC]	[SD]	[NH] [TN]	[NJ] [TX]	(NM) (UT)	[NY] [VT]	[VA]	[WA]	[UN]	[UK]	[WY]	(PR)
ivi	1201	ارديدا	[114]	LIVI	[OI]	[* •]	['A]	Lan	1 ** * 1	[••• •]	[• • •]	fr v)

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount

Type of Security	Aggregate Offering Price	Amount Already Sold
Debt	\$	\$
Equity	\$ <u>2,355,651.8</u>	3 \$2 ,000,001.22
□ Common ⊠ Prefeπed		
Convertible Securities (including warrants)	\$	\$
Partnership Interests	\$	\$
Other (Specify)	s	\$
Total		<u>3 \$2,000,001,22</u>
Answer also in Appendix, Column 3, if filing under ULOE.		
2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."	Number Investors	Aggregate Dollar Amoun of Purchases
Accredited Investors	_6	\$2,000,001,22
Non-accredited Investors		\$
Total (for filings under Rule 504 only)		\$
Answer also in Appendix, Column 4, if filing under ULOE.		
3. If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C - Question 1.		
Type of offering	Type of Security	Dollar Amoun Sold
Rule 505		\$
Regulation A		\$
Rule 504		\$
Total		\$
4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
Transfer Agent's Fees		\$
Printing and Engraving Costs		s
Legal Fees		\$30,000
Accounting Fees] \$
Engineering Fees		
Sales Commissions (specify finders' fees separately)		s
Other Expenses (identify)		s
Total	6	\$30,000

C. OFFERING PRIC	e, number of investors, expenses and use	OF F	KUCEEDS	
1 and total expenses furnished in respon	gate offering price given in response to Part C - Question nse to Part C - Question 4.a. This difference is the			\$ <u>2,325,651.83</u>
used for each of the purposes shown. If the estimate and check the box to the left of the	gross proceeds to the issuer used or proposed to be the amount for any purpose is not known, furnish an the estimate. The total of the payments listed must equal tot forth in response to Part C - Question 4.b above.			
the adjusted gross proceeds to the issuer so	et forth in response to Part C - Question 4.0 above.		Payments to Officers, Directors, & Affiliates	Payments To Others
Salaries and fees		Ö	s	□ \$
Purchase of real estate			\$	
Purchase, rental or leasing and installa	ation of machinery and equipment		s	
•	ings and facilities	O	s	□ \$
Acquisition of other businesses (inclu- offering that may be used in exchange	ding the value of securities involved in this for the assets or securities of another	_	r	. .
•				o s
				S
				⊠\$ 2,355,651.83
Other (specify):		0	2	- \$
		_	s	- \$
Column Totals			\$	
Total Payments Listed (Column totals	added)		⊠ \$ <u>2</u> .	<u>355,651.83</u>
	D. FEDERAL SIGNATURE			
following signature constitutes an underta-	igned by the undersigned duly authorized person. If this not king by the issuer to furnish to the U.S. Securities and Excha he issuer to any non-accredited investor pursuant to paragrap	inge C	commission, up	e 505, the on written request
Issuer (Print or Type)	Signature		Date	
Awareness, Inc.	Sul		January 🛂, 20	009
Name of Signer (Print or Type)	Title of Signer (Print or Type)			
Stephen Richards	Chief Financial Officer			
				

- ATTENTION -

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

